

Consecutive Overseas Tour (COT) & In-Place COT (IPCOT) - Military
Relocation Agreement Travel (RAT) - Civilian
Voucher processing

Manual Submission guide to COT/IPCOT/RAT

Submit all required documents to the 86CPTS.CS@US.AF.MIL org box

Required Documents

- 1351-2, Travel Voucher (must be MAY 2011 form, previous editions not accepted)
- 1351-2C, Travel Voucher Continuation Sheet (if your itinerary will not fit in block 15)
- Orders (front and backside)
- SATO/CTO Airfare Itinerary
- Receipts for expenses over \$75 dollars
- IBA Statement
- GTC Statement (optional -- preferred to pay out actual cost of expenses that were paid in foreign currency)
- Lost Receipt Form (if provided receipts are not sufficient or available)
- Direct Deposit Form [civilians only]
- WTA Form [civilians only]

TRAVEL VOUCHER OR SUBVOUCHER				Read Privacy Act Statement, Penalty Statement, and Instructions on back before completing form. Use typewriter, ink, or ball point pen. PRESS HARD. DO NOT use pencil. If more space is needed, continue in remarks.																																																																																									
1. PAYMENT <input checked="" type="checkbox"/> Electronic Fund Transfer (EFT) <input type="checkbox"/> Payment by Check		SPLIT DISBURSEMENT: The Paying Office will pay directly to the Government Travel Charge Card (GTCC) contractor the portion of your reimbursement representing travel charges for transportation, lodging, and rental car if you are a civilian employee, unless you elect a different amount. Military personnel are required to designate a payment that equals the total of their outstanding government travel card balance to the GTCC contractor. NOTE: A split disbursement is only necessary when a GTCC is used while on official travel for the Government.																																																																																											
<input checked="" type="checkbox"/> Pay the following amount of this reimbursement directly to the Government Travel Charge Card contractor: \$ 0																																																																																													
2. NAME (Last, First, Middle Initial) (Print or type) Doe, John		3. GRADE E-7		4. SSN 123-45-6789		5. TYPE OF PAYMENT (X as applicable) <input type="checkbox"/> TDY <input type="checkbox"/> PCS <input checked="" type="checkbox"/> Other <input type="checkbox"/> Dependent(s)																																																																																							
6. ADDRESS, a. NUMBER AND STREET PSC 2 BOX 12345		b. CITY APO		c. STATE AE		d. ZIP CODE 09012																																																																																							
e. E-MAIL ADDRESS JASON.LEFAVE@US.AF.MIL																																																																																													
7. DAYTIME TELEPHONE NUMBER & AREA CODE 480-1234		8. TRAVEL ORDER/AUTHORIZATION NUMBER TA-0123		9. PREVIOUS GOVERNMENT PAYMENTS/ADVANCES 0.00		10. FOR D.O. USE ONLY a. D.O. VOUCHER NUMBER b. SUBVOUCHER NUMBER c. PAID BY d. COMPUTATIONS Civ only: please put your RET option as well as your State of Residence.																																																																																							
11. ORGANIZATION AND STATION 86 CPTS/Ramstein, Germany		12. DEPENDENT(S) (X and complete as applicable) <input checked="" type="checkbox"/> ACCOMPANIED <input type="checkbox"/> UNACCOMPANIED		13. DEPENDENTS' ADDRESS ON RECEIPT OF ORDERS (Include Zip Code) 33A Zum Baya, Kindsbach germany 66862		14. HAVE HOUSEHOLD GOODS BEEN SHIPPED? (X one) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Explain in Remarks)																																																																																							
15. ITINERARY <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th>a. DATE</th> <th>b. PLACE (Home, Office, Base, Activity, City and State, City and Country, etc.)</th> <th>c. MEANS/ MODE OF TRAVEL</th> <th>d. REASON FOR STOP</th> <th>e. LODGING COST</th> <th>f. POC MILES</th> </tr> </thead> <tbody> <tr><td>03/08</td><td>DEP 33A ZUM BAYA, KINDSBACH, GERMANY</td><td>PA</td><td></td><td></td><td></td></tr> <tr><td>03/08</td><td>ARR FRANKFURT INTL AIRPORT, GERMANY</td><td></td><td>AD</td><td></td><td>75</td></tr> <tr><td>03/08</td><td>DEP (CITY + COUNTRY/STATE)</td><td>CP</td><td></td><td></td><td></td></tr> <tr><td>03/08</td><td>ARR BALTIMORE INTL AIRPORT, MA</td><td></td><td>AD</td><td></td><td></td></tr> <tr><td>03/08</td><td>DEP (CITY + COUNTRY/STATE)</td><td>CP</td><td></td><td></td><td></td></tr> <tr><td>03/08</td><td>ARR ATLANTA INTL AIRPORT, GA</td><td></td><td>AT</td><td></td><td></td></tr> <tr><td>03/08</td><td>DEP (CITY + COUNTRY/STATE)</td><td>PA</td><td></td><td></td><td></td></tr> <tr><td>03/08</td><td>ARR 123 PEACHTREE RD, MACON, GA</td><td></td><td>LV</td><td></td><td>25</td></tr> <tr><td>03/28</td><td>DEP (MUST BE LOCATION ON ORDERS)</td><td>PA</td><td></td><td></td><td></td></tr> <tr><td>03/28</td><td>ARR ATLANTA INTL AIRPORT, GA</td><td></td><td>AT</td><td></td><td>25</td></tr> <tr><td>03/28</td><td>DEP (CITY + COUNTRY/STATE)</td><td>CP</td><td></td><td></td><td></td></tr> <tr><td>03/28</td><td>ARR BALTIMORE INTL AIRPORT, MA</td><td></td><td>AD</td><td></td><td></td></tr> <tr><td>03/28</td><td>DEP (CITY + COUNTRY/STATE)</td><td>CP</td><td></td><td></td><td></td></tr> <tr><td>03/29</td><td>ARR FRANKFURT INTL AIRPORT, GERMANY</td><td></td><td>AD</td><td></td><td></td></tr> </tbody> </table>		a. DATE	b. PLACE (Home, Office, Base, Activity, City and State, City and Country, etc.)	c. MEANS/ MODE OF TRAVEL	d. REASON FOR STOP	e. LODGING COST	f. POC MILES	03/08	DEP 33A ZUM BAYA, KINDSBACH, GERMANY	PA				03/08	ARR FRANKFURT INTL AIRPORT, GERMANY		AD		75	03/08	DEP (CITY + COUNTRY/STATE)	CP				03/08	ARR BALTIMORE INTL AIRPORT, MA		AD			03/08	DEP (CITY + COUNTRY/STATE)	CP				03/08	ARR ATLANTA INTL AIRPORT, GA		AT			03/08	DEP (CITY + COUNTRY/STATE)	PA				03/08	ARR 123 PEACHTREE RD, MACON, GA		LV		25	03/28	DEP (MUST BE LOCATION ON ORDERS)	PA				03/28	ARR ATLANTA INTL AIRPORT, GA		AT		25	03/28	DEP (CITY + COUNTRY/STATE)	CP				03/28	ARR BALTIMORE INTL AIRPORT, MA		AD			03/28	DEP (CITY + COUNTRY/STATE)	CP				03/29	ARR FRANKFURT INTL AIRPORT, GERMANY		AD			16. POC TRAVEL (X one) <input checked="" type="checkbox"/> OWN/OPERATE <input type="checkbox"/> PASSENGER	
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c. REVIEWER'S PRINTED NAME NOT REQUIRED; LEAVE BLANK		d. SIGNATURE _____		e. TELEPHONE NUMBER _____		f. DATE _____																																																																																							
21. a. APPROVING OFFICIAL'S PRINTED NAME _____		b. SIGNATURE _____		c. TELEPHONE NUMBER _____		d. DATE _____																																																																																							
22. ACCOUNTING CLASSIFICATION _____																																																																																													
23. COLLECTION DATA _____																																																																																													
24. COMPUTED BY _____		25. AUDITED BY _____		26. TRAVEL ORDER/ AUTHORIZATION POSTED BY _____		27. RECEIVED (Payee Signature and Date or Check No.) _____																																																																																							
28. AMOUNT PAID _____																																																																																													

1351-2 – Travel Voucher

Please review each item to verify the accuracy of your voucher. Each numbered item coincides with the numbered blocks of the 1351-2.

- 1
 - Select either EFT or check payment
 - To the right, identify the amount to be paid to your GTC (can be \$0.00)
- 2
 - List your name. (last, first, middle initial)
- 3
 - List your grade (ex. E-5, O-5, GS-15)
- 4
 - List your complete SSN
- 5
 - Check Other
- 6
 - List your PSC address in sections a, b, c, and d (ex. PSC 1 Box 2345 APO AE 12345) *note* this is where your check will be mailed if you selected that method of payment
 - Section e - List your email address so we may contact you and send a payment notification
- 7
 - List your phone number (DSN or commercial)
- 8
 - List your order number (found in block 20 of your orders)
- 9
 - List how much money you have already been paid to complete this travel. If you have not been advanced any money, place 0.00 in this block.
- 10
 - Leave sections a, b, and c blank.
 - Section d - List your state of legal residence, and retirement code [civilians only]
- 11
 - List your current organization and station (ex. 86 AMXS / Ramstein Air Base)
- 12
 - Check which applies; accompanied/unaccompanied
 - Column a - List the name of your dependent
 - Column b - List the relationship of your dependent
 - Column c - List the birth date/marriage of your dependent
- 13
 - List physical address of dependents upon receipt of orders
- 14
 - Check “NO” for household goods shipment
- 15
 - Notes
 - Date the itinerary, including year
 - All reasons for stop at an entry/exit airport will be AD, between CONUS locations is AT
 - Include all airports
 - Mode of travel, from airport to airport, will be CP, if you paid for the tickets yourself
 - If you cannot fit your itinerary in block 15, please use the attached 1351-2C

Modes of Travel

PA = Private automobile
CA = Commercial automobile (Taxi)
CP = Commercial Plane
TP = Plane tickets purchased by government

Reasons for Stop

AT = Airports (within CONUS)
AD = Airports used to change countries (to/from)
LV = Dependent's stop in Germany
MC = Final stop on itinerary

16

- If a private automobile was used for any portion of this travel, check whether your dependent was owner, operator, or passenger

17

- Check the appropriate box, depending on the time span of your itinerary

18

- Column a - List the date(s) you paid for your expense(s) (GTC statements are helpful)
- Column b - List the name(s) of the expense(s) you are claiming
- Column c - List the cost of the expense(s) in US dollars (GTC statements are helpful)

19

- Leave this block blank

20

- Section a - Sign your voucher
- Section b - Date your signature
- Sections c, d, e, and f - leave blank

21 – 28

- Leave these blocks blank